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SERIAL NUMBER 10/647,982	FILING OR 371(c) DATE 08/26/2003 RULE	CLASS 435	GROUP ART UNIT 1634	ATTORNEY DOCKET NO. 01313.US1
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APPLICANTS

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**** CONTINUING DATA *******

or This appln claims benefit of 60/406,432 08/28/2002 and is a CIP of 10/230,007 08/28/2002
 which claims benefit of 60/315,501 08/28/2001

**** FOREIGN APPLICATIONS *******

None / or

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **
 11/25/2003

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>Signature</i> Examiner's Signature Initials	STATE OR COUNTRY NY	SHEETS DRAWING 0	TOTAL CLAIMS 56	INDEPENDENT CLAIMS 2
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ADDRESS
 25533

TITLE

Single nucleotide polymorphisms diagnostic for schizophrenia

FILING FEE RECEIVED 1528	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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